

Program B: Patient Care

Program Authorization: Act 107 of 1962: R.S. 28:380 et. seq., R.S. 6:251(C); R.S. 258 and R.S. 39:1554(D)

Program Description

The mission of the Patient Care Program is to provide residential living and other support and services to individuals with developmental disabilities living at Metropolitan Developmental Center.

The goal of the Patient Care Program is to enhance quality of life while providing 24-hour residential living services and supports to individuals with developmental disabilities living at Metropolitan Developmental Center.

The Patient Care Program is a program within Metropolitan Developmental Center whose purpose is to provide residential living and other support and services to

the individuals living at Metropolitan Developmental Center in order to support people being served in identifying, pursuing, and reaching their goals.

The Patient Care Program consists of the following activities: (1) Residential Services, (2) Health Services, (3) Physician Services, (4) Central Clinic, (5) Nursing Services, (6) Dental Services, (7) Pharmacy, (8) Client Records, (9) Social Work Services, (10) Psychology, (11) Habilitation, (12) Speech/Audiology, (13) Occupational Therapy, (14) Physical Therapy, (15) Recreation and Leisure, (16) Rehabilitation Engineering, (17) Work Adjustment and Training, (18) Quality Improvement, (19) OMRP/IPC, (20) Nutrition, and (21) Food Services.

RESOURCE ALLOCATION FOR THE PROGRAM

	ACTUAL 2000-2001	ACT 12 2001-2002	EXISTING 2001-2002	CONTINUATION 2002-2003	RECOMMENDED 2002-2003	RECOMMENDED OVER/(UNDER) EXISTING
MEANS OF FINANCING:						
STATE GENERAL FUND (Direct)	\$353,460	\$246,883	\$246,883	\$246,883	\$246,883	\$0
STATE GENERAL FUND BY:						
Interagency Transfers	17,808,627	19,512,618	19,512,618	20,221,950	20,720,256	1,207,638
Fees & Self-gen. Revenues	899,066	941,815	941,815	941,815	941,815	0
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
FEDERAL FUNDS	0	0	0	0	0	0
TOTAL MEANS OF FINANCING	\$19,061,153	\$20,701,316	\$20,701,316	\$21,410,648	\$21,908,954	\$1,207,638
EXPENDITURES & REQUEST:						
Salaries	\$11,093,372	\$12,394,908	\$12,394,908	\$12,869,991	\$13,693,926	\$1,299,018
Other Compensation	822,052	1,212,000	1,212,000	1,212,000	1,212,000	0
Related Benefits	1,774,634	2,025,573	2,025,573	2,120,589	2,189,261	163,688
Total Operating Expenses	2,016,436	1,128,123	1,128,123	1,155,182	1,026,250	(101,873)
Professional Services	1,482,654	1,843,646	1,843,646	1,913,372	1,843,646	0
Total Other Charges	1,798,294	1,913,403	1,913,403	1,932,295	1,736,652	(176,751)
Total Acq. & Major Repairs	73,711	183,663	183,663	207,219	207,219	23,556
TOTAL EXPENDITURES AND REQUEST	\$19,061,153	\$20,701,316	\$20,701,316	\$21,410,648	\$21,908,954	\$1,207,638
AUTHORIZED FULL-TIME						
EQUIVALENTS: Classified	520	563	563	563	562	(1)
Unclassified	6	6	6	6	6	0
TOTAL	526	569	569	569	568	(1)

SOURCE OF FUNDING

This program is funded with Interagency Transfers, Fees and Self-generated Revenue, and State General Fund. Interagency Transfers include Title XIX funds received from the Department of Health and Hospitals, Medical Vendor Payments Program, as reimbursement for services provided to Medicaid-eligible residents, and funds from the Department of Education for the Special Milk Program. Fees and Self-generated Revenue includes payments for services provided to patients based on a sliding fee scale, and reimbursement for meals served to employees and visitors.

MAJOR FINANCIAL CHANGES

GENERAL FUND	TOTAL	T.O.	DESCRIPTION
\$246,883	\$20,701,316	569	ACT 12 FISCAL YEAR 2001-2002
			BA-7 TRANSACTIONS:
\$0	\$0	0	None
\$246,883	\$20,701,316	569	EXISTING OPERATING BUDGET - December 20, 2001
\$0	\$282,228	0	Annualization of FY 2001-2002 Classified State Employees Merit Increase
\$0	\$287,871	0	Classified State Employees Merit Increases for FY 2002-2003
\$0	\$207,219	0	Acquisitions & Major Repairs
\$0	(\$183,663)	0	Non-Recurring Acquisitions & Major Repairs
\$0	\$816,016	0	Salary Base Adjustment
\$0	(\$522,024)	0	Attrition Adjustment
\$0	(\$90,244)	0	Salary Funding from Other Line Items
\$0	(\$188,380)	0	Other Non-Recurring Adjustments - Lafourche ARC - Adult Habilitation
\$0	\$620,550	0	Annualization of DHH Pay Raise BA-7s
\$0	(\$21,935)	(1)	Annualization of Act 844 BA-7s
\$246,883	\$21,908,954	568	TOTAL RECOMMENDED
(\$246,883)	(\$21,908,954)	(568)	LESS GOVERNOR'S SUPPLEMENTARY RECOMMENDATIONS
\$0	\$0	0	BASE EXECUTIVE BUDGET FISCAL YEAR 2002-2003
			SUPPLEMENTARY RECOMMENDATIONS CONTINGENT UPON RENEWAL OF THE SUSPENSION OF EXEMPTIONS TO THE 3% SALES TAX BASE:
\$246,883	\$21,908,954	568	Total discretionary budget recommendation for this program
\$246,883	\$21,908,954	568	TOTAL SUPPLEMENTARY RECOMMENDATIONS CONTINGENT UPON RENEWAL OF THE SUSPENSION OF EXEMPTIONS TO THE 3% SALES TAX BASE
\$246,883	\$21,908,954	568	GRAND TOTAL RECOMMENDED

09-342

PROFESSIONAL SERVICES

\$110,740	Dentist - annual exams and cleaning
\$50,148	Dietician and nutritional services
\$59,614	Habilitation and vocational training
\$18,900	Medical records
\$1,415	Medical safe transportation
\$22,637	Non-contacted services for physical therapy, audiology, non-Medicaid specialists
\$205,600	Nursing - shift coverage and relief coverage
\$99,300	Occupational therapy services
\$9,252	Peer Review services - provides expertise in medical and psychological areas
\$2,520	Pharmacist - drug check and records review
\$108,500	Physical Therapist - physical therapy treatments
\$666,790	Physician services
\$120,700	Psychiatric services
\$66,494	Psychological services
\$40,124	Respiratory therapy
\$99,000	Sitter services - provides 24-hour care to medically fragile clients who are hospitalized
\$93,412	Specialist and non-medicare providers
\$68,500	Speech and Audiology services
\$1,843,646	TOTAL PROFESSIONAL SERVICES

OTHER CHARGES

\$55,000	Gary Melerine fund - funding is due to a consent judgment from Melerine v. Fischer, J. D. C. #24-036 in which Metropolitan Developmental Center is ordered to pay all costs of future medical expenses and costs of care for Gary M. as of May 1, 1986.
\$235,583	Extended Family Living services
\$302,466	Provider-based fees - paid in accordance with LA R.S. 46:2601-2605, which briefly states that a fee of \$10.93 per patient-day will be imposed on all intermediate care facilities
\$78,931	Extended Family Living program - cash subsidy available to consumers in Region 3
\$671,980	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$11,629	Jackson Regional Laundry
\$1,053,043	Provider Fee
\$1,064,672	SUB-TOTAL INTERAGENCY TRANSFERS
\$1,736,652	TOTAL OTHER CHARGES

ACQUISITIONS AND MAJOR REPAIRS

\$207,219 Funding for replacement of inoperable and obsolete equipment.

\$207,219 TOTAL ACQUISITIONS AND MAJOR REPAIRS